

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO	FILING DATE	
						APPLICANT(S)		
						CLAIMS		
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	/						51	
2		/					52	
3							53	
4							54	
5							55	
6							56	
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42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	44						TOTAL IND.	
TOTAL DEP.	15						TOTAL DEP.	1